MC MEDICAL CARE DISTRICTS [amended 2/03]

PREAMBLE

The MC Health Care districts are established to accommodate and direct the development of hospitals to serve as the nucleus of health care campuses. The uses permitted within these districts are intended to provide a convenient and efficient health care delivery system for the City and surrounding region. In addition to hospitals, MC districts permit development of closely related services such as medical offices, housing for the elderly and special needs groups; and, limited retail and various types of health care related services ancillary to principal district uses. It is the further intent of MC districts to assist and encourage the development of medical institutional land uses in a campus setting which includes not only the primary buildings and structures, but also, campus support systems involving pedestrian and vehicular circulation, parking, signs, exterior lighting, loading and materials handling, support facilities, interconnecting systems of above and below ground corridors, and related facilities. The districts are intended to support uses providing human care.

SECTION 904: PRINCIPAL USES PERMITTED

In an MC Medical Care District no building or land shall be used and no building shall be erected, structurally altered, or occupied except for one (1) or more of the following specified uses, unless otherwise provided for in this Ordinance:

- 1. General medical, surgical hospitals and specialty hospitals, but not including animal hospitals.
- 2. Outpatient diagnostic and treatment centers, day surgery centers, rehabilitation clinics, and urgent care facilities.
- 3. Professional medical offices intended primarily for health care related professions or activities or hospital support services.
- 4. Offices for non-profit organizations related to or providing health care services.
- 5. Diagnostic and medical laboratories or research facilities.
- 6. Pharmacies without drive-up window service.
- 7. Medical appliance sales and servicing.
- 8. Educational facilities for the training of interns, nurses, and allied health care personnel.
- 9. Specialized congregate housing for the disabled and senior housing for the elderly at a density not to exceed the density standards of the RM-3, High Density Multiple Family Zone District. The density to be based on the area encompassed by the housing structure(s) and parking and open spaces specifically assigned to the specialized housing.

- 10. Conference facilities for events and activities related to the permitted MC district uses.
- 11. Ambulance services and associated maintenance facilities.
- 12. Parking decks (associated with uses permitted in the MC district) of up to two (2) levels above grade (roof parking is not counted as a deck) provided the setbacks for principal buildings are met.
- 13. Private, indoor, recreational facilities and fitness centers located within a hospital, provided such facilities are for employees and patients and not available to the general public.
- 14. Chapels, churches, places of worship, and related facilities, when located within a hospital building.
- 15. Accessory mobile medical technology units which will be stationed on the grounds of a hospital campus.
- 16. Establishments engaged in providing diagnostic services, extensive medical treatment (including surgical services) and other hospital services, as well as continuous nursing service.
- 17. Establishments primarily engaged in providing intermediate or long term nursing and health related care to individuals, typically classified as nursing homes, elder care facilities, and other such operations.
- 18. Dwellings affiliated with a hospital_providing shelter and services for the elderly, which may include meals, housekeeping, personal care assistance and medical services.
- 19. Accessory buildings and accessory uses customarily incidental to the above Principal Permitted Uses.
- 20. Uses similar to the above Principal Permitted Uses.

SECTION 905: SPECIAL LAND USES PERMITTED

The following uses, and their accessory buildings and accessory uses, shall be permitted under the purview of Section 2332 after review and approval of the use (and a site plan, if required) by the Planning Commission, after Public Hearing, subject to the applicable conditions, and any other reasonable conditions imposed by the Planning Commission:

- 1. Any permitted use, which includes provision for drive-up window services.
- 2. Pharmacies with drive-up window service.

- 3. Parking decks (associated with uses permitted in the HC district) exceeding two (2) levels above grade (roof parking is not counted as a deck) provided the setbacks for principal buildings are met.
- 4. Specialized lodging facilities, including those with accessory conference centers and restaurants used for visitors and patients of hospitals.
- 5. Accessory mobile medical technology units which will be stationed outside the grounds of a hospital campus.
- 6. Interconnected systems of above and below ground corridors when traversing a public right-of-way.
- 7. Helipads, heliports, and helistops, under the following conditions:
 - a. Helicopter access must be used for emergency transportation only.
 - b. All helipads must be located within the boundaries of the hospital campus and shall be isolated from residential uses and screened from the street or adjoining residential uses.
 - c. A specific hospital campus shall have only one primary functioning helipad, however, a back-up or secondary helipad may exist subject to Planning Commission approval.
 - d. There must be demonstrated compliance with the standards of the Michigan Bureau of Aeronautics and the Federal Aviation Administration.
 - e. All landing and take-off sites (pads) shall be located not less than 100 feet from all property lines, unless a lesser distance is approved by the Planning Commission.
 - f. The landing and take-off site shall contain perimeter landscape, fencing, and/or other facilities or structures, or combinations thereof.
 - g. The site shall be designed to ensure adequate separation between pedestrian circulation routes and the landing pad.
- 8. <u>Power Plants</u> for hospital or medical facilities provided they are screened from off-site view of residential areas by use of walls, berms, landscaping, and/or other approved structures. Plants shall blend with the overall architectural character of attached and surrounding structures and the hospital campus as a whole.
- 9. Accessory buildings and accessory uses customarily incidental to the above Special Land Uses Permitted.

SECTION 906: PLANNED UNIT DEVELOPMENTS

Planned developments may be allowed by the Planning Commission under the procedural guidelines of Section 2101. The intent of Planned Unit Developments in the MC Health Care Districts is to allow mixed land uses, which are compatible to each other, while prohibiting nonresidential uses which would not be compatible or harmonious with residential dwellings.

SECTION 707: AREA AND BULK REQUIREMENTS

1. <u>Minimum lot size</u>: 10,890 sq. feet.

2. <u>Maximum lot coverage</u>:

Buildings: 70 % Pavement: 25 %

- 3. <u>Lot width</u>: 100 feet (shall be measured at road frontage unless a cul-de-sac, then measured from setback).
- 4. <u>Width to depth ratios</u>: The depth of any lot(s) or parcel(s) shall not be more than three (3) times longer its width.
- 5. Height Limit:

Maximum height: 3 stores or 100 feet, provided, however, buildings of greater height may be approved by the Planning Commission subject to a Special Use Permit

<u>Height measurement</u>: In the case of a principal building, the vertical distance measured from the average finished grade to the highest point of the roof surface where the building line abuts the front yard, except as follows: to the deck line of mansard roofs, and the average height between eaves and the ridge of gable, hip, and gambrel roofs (see Figure 2-2). If the ground is not entirely level, the grade shall be determined by averaging the elevation of the ground for each face of the building (see Figure 2-3).

6. Front Setbacks:

Minimum:

Expressway, Arterial Street or Major Street: 30 feet

Collector Street: 20 feet

Minor Street or campus access drive: 10 feet

Maximum:

Expressway, Arterial Street or Major Street: 50 feet

Collector Street: 40 feet

Minor Street or campus access drive: 30 feet

7. Rear setback: 10 feet

8. <u>Setback from the ordinary high water mark or wetland</u>: 75 feet (principal structures only).

9. Side setbacks:

1-story: 8 feet and 12 feet 2-story: 10 feet and 14 feet

<u>Note</u>, <u>setback measurement</u>: The required front yard shall be measured from the right-of-way line to the nearest foundation or building wall of the building or structure. The required rear yard shall be measured from the property line to the nearest foundation or building wall of the building or structure. Side yard setbacks shall be measured from the property line to the determined drip line of buildings.

- 10. <u>Zero lot line option</u>: New principal buildings may be erected on the rear lot line and/or one side yard line provided:
 - a. The building has an approved fire rating for zero-lot line development under the building code.
 - b. The building has adequate fire access preserved pursuant to fire code requirements.
 - c. The zero lot line side is not adjacent to a street.
 - d. A maintenance access easement is granted by the adjacent property owner and recorded with the County Register of Deeds and provided to the zoning administrator with the site plan or plot plan.
 - e. It is not adjacent to wetlands, or waterfront.
- 11. All required side and rear setbacks shall be landscaped, greenbelt buffers, unless zero-lot-line is employed for a structure or fire access. At least fifty percent of the required front yard setback shall be landscaped and adjacent to the road right-of-way. An average minimum greenbelt of 10 feet shall be maintained.

12. Pedestrian Circulation:

- a. Pedestrian systems connecting visitor and employee parking to building entrances shall be provided.
- b. Whenever a hospital campus, or portion thereof, is located adjacent to public sidewalks or non-motorized pathways under the control of the City, the hospital's pedestrian and vehicular circulation systems shall be designed to link with these public systems in a safe and efficient manner.